

**STORAGE TANK
ETHANOL BLENDED MOTOR FUEL
CONVERSION
APPLICATION / NOTIFICATION**

Environmental & Regulatory Services Division
Bureau of Petroleum Products and Tanks
P.O. Box 7837
Madison, WI 53707-7837
(608) 267-9795 (608) 266-8981

INSTRUCTIONS: This form is to be submitted to the Department of Commerce along with the plan submittal for new installations, or submitted independently for conversions of existing systems from conventional motor fuels to blends greater than 10% ethanol. For existing tank systems, submit this form within five business days after conversion to the Department of Commerce at the address in the upper right corner of this page.

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

Part I

1. OWNER INFORMATION

Customer ID#
Name

2. PROJECT INFORMATION

Site ID# Facility ID#
Facility Name

3. CONTRACTOR INFORMATION

Customer ID#
Contractor Name

Company Name	Site Address	Number and Street
Number and Street	<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of:	City, State, Zip Code
City, State, Zip Code	County	Contact Person Customer ID#
Telephone Number () ()	Fire Dept. Providing Fire Coverage FDID#	Telephone Number () ()
Fax Number () ()		Fax Number () ()

4. TANK Information

Tank Orientation: ☐ Underground ☐ Aboveground **Tank Size:** _____ ☐ New Tank ☐ Existing Tank

Is tank lined: ☐ Yes ☐ No **Note:** Tanks with interior lining will not be approved for E85 storage

Commerce Regulated Object Number: _____ **Year of Install** _____ **Tank:** _____ **Pipe:** _____

Tank leak detection method: ☐ Automatic tank gauging ☐ Inventory control and tightness testing ☐ Interstitial monitoring
☐ Statistical Inventory Reconciliation (SIR) ☐ Visual (Aboveground storage tank only)

Component:	Manufacturer	Model/Brand	UL Listed or Verified by Manufacturer for E85	Comments
If manufacturer or model can not be determined write "Unk" in the corresponding box. In the Comment area write : "Unknown" if compatibility can not be determined; write "NA" if system does not have component listed, write "HC" and the treatment material if a hard-coat treatment is used to achieve compatibility.				
Tank construction material:			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Spill bucket			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Overfill / Auto shut-off / Ball float			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Drop tube			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Submersible pump			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Leak detection probes			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Sump sensors			<input type="checkbox"/> Material Approval	

5. Pipe Information: Tank top containment sump for submersible / pipe connections: ☐ Yes ☐ No

Configuration: ☐ Single wall ☐ Double wall **Type:** ☐ Steel ☐ Fiberglass ☐ Flexible ☐ Other (Specify): _____

Pipe construction material:			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Gaskets/seals			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Pipe sealant/adhesive			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Flex connector			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Line leak detector			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Flow restrictor			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	

6. Dispenser Information: Blending dispenser: ☐ Yes ☐ No Containment sump under dispenser: ☐ Yes ☐ No

Dispenser piping			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Gaskets/seals			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Product pumping device			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Check valve			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Nozzle(s)/Swivel(s)			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Hose(s)			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Break-away device			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Meter			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Fuel filters			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Emergency valve			<input type="checkbox"/> Listed <input type="checkbox"/> Verified	
Sump sensor			<input type="checkbox"/> Material Approval	

I certify by signature that I have personally examined and/or am familiar with the information submitted to verify system E85 compatibility, and the information is true, accurate, and complete.

Signature of petroleum equipment contractor or professional engineer Date: _____

For Office Use Only

- ☐ Plan Review
- ☐ Copy to Inspector
- ☐ Copy to Permit

Part II

Responsibilities of Tank Owner/Operator Before Ethanol or Ethanol Blended Motor Fuel (EBMF) is Transferred to the Tank

- ☐ Determine equipment compatibility - Part I of this form.
- ☐ Inform the facility's UST insurance carrier of plans to convert to a gasoline-ethanol blend exceeding 10% ethanol. The UST insurance carrier may have additional requirements other than what Commerce or Comm 10 requires.
- ☐ Obtain an amended certificate of insurance indicating UST coverage for the E-Blend stored and submit to Commerce.
- ☐ Check for water in the tank. No level of water is acceptable for gasoline-ethanol blended fuels.
- ☐ All visible fittings and connections at the top of the tank are tight (no vapors escape and no water enters).
- ☐ Sump and spill containment covers secured to prevent water from entering.
- ☐ Water infiltration problems fixed if necessary.
- ☐ The tank has been cleaned of all water and sediment. Company providing service:
Company providing service: _____
City: _____, State: _____ Telephone #: _____
- ☐ How / where is product being disposed of: _____
- ☐ Fill labeling - Identify fill port and paint access cover according to API RP 1637.
- ☐ Dispenser labeling – label dispenser in compliance with Comm 48.

First Delivery

- ☐ Tank filled to 80 percent capacity (recommended by the Renewable Fuels Association or RFA) and kept as full as possible for 7 to 10 days.
- ☐ Conduct a precision test of the tank system (0.1 gph leak rate) with ATG system within seven days after tank is filled to make sure system is tight and leak detection equipment is operating properly. Report any "Fail" results.
- ☐ Test for water (use alcohol compatible paste if you stick your tanks) at the beginning of each shift for the first 48 hours after delivery (RFA). If there is water in the tank, remove it, find out how it got there and fix it so it doesn't occur again.
- ☐ Have dispenser calibrated prior to any retail sales.
- ☐ Prior to dispensing, notify Commerce Retail Inspector that E85 has been delivered and the dispensing system is going operational.

Tank Owner Signature

Company

(Note: By signing, signer is acknowledging that all the above preparatory items have been conducted.)

Print Tank Owner Name

Date:

Failure to submit this form with all items completed will result in the tank and dispenser being subject to red-tagging and shutdown.

A tank with any "unknowns" will not be approved for service for gasoline-ethanol blends exceeding 10% ethanol without a statement from the contractor or professional engineer stating that in their professional judgment the system is acceptable for EBMF. Without such statement the tank and dispenser will be subject to red-tagging and shutdown.

Fee Submittal	Plan Review Fee	Installation Inspection Fee	Plan Revision Fee	Re-inspection Fee
When submitted independent of a broader plan submittal application	\$35	\$100 Except conversion to SIR	\$100	\$100